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September 6, 2011

TO: Each Supervisor

FROM: Jonathan E. Fielding, M.D., M.P.H.
Director and Health Officer

SUBJECT: **NOTICE OF INTENT TO REQUEST DELEGATED AUTHORITY TO APPROVE
A PERCENTAGE INCREASE EXCEEDING 10 PERCENT OF THE TOTAL
CONTRACT AMOUNT**

This to notify you that I intend to request delegated authority to execute sole source agreements with Behavioral Health Services, Inc., Prototypes, and Tarzana Treatment Center to provide Medication-Assisted Treatment (MAT) to eligible Los Angeles County residents to provide an increase or decrease in funding up to 25 percent above or below each term's annual base maximum obligation for each of the agreements. In accordance with Board of Supervisors' Policy 5.120, prior Board notice is required for any department requesting delegated authority to increase Board-approved contracts by over 10 percent.

Background

MAT is the use of medications, in combination with counseling and behavioral therapies, to provide a more comprehensive approach to the treatment of substance use disorders. It is provided to persons 18 years or older on a voluntary basis, and to patients between the ages of 16 and 18 with consent of a parent or guardian. In order to be eligible, patients must, at the time of enrollment, be enrolled in, or within thirty (30) days of discharge from, an outpatient or other nonresidential, detoxification or residential program operated under funding by SAPC. Currently, those eligible must be either alcohol or opioid dependent patients.

In March 2010, the DPH-SAPC began a pilot project that included County contract providers Behavioral Health Services, Inc. (BHS), Prototypes, and Tarzana Treatment Center (TTC) to examine the use of MAT (specifically Vivitrol) by SAPC substance use disorder (SUD) clients. For several years, Vivitrol has been used in the private sector and by those with sufficient insurance coverage; however, due to the high cost of the medication (currently \$782 per dose), Vivitrol has not been available to most of the clients served by SAPC-contracted treatment agencies.

The University of California, Los Angeles' Integrated Substance Abuse Programs (UCLA-ISAP) is currently evaluating the MAT pilot project and the preliminary findings are positive. UCLA found that engagement in treatment (i.e., length of stay of at least 30 days) was higher for clients who took at least one dose of Vivitrol. When compared to other clients admitted for primary alcohol use, clients reported significant decreases in alcohol use, reducing their prior month use from 17 days to less than two days. Over the course of eight weeks, cravings for alcohol reduced from a mean score of 15.7 on the Urge to Drink scale to a mean of 7.3. Finally, less than ten percent of the clients reported any side effects, or a needed to leave the pilot because of the side effects. These preliminary findings indicate that the use of Vivitrol is helpful in maintaining clients in treatment and appears to also assist clients in significantly reducing their alcohol use.

Funding for MAT services will be 100 percent supported by federal block grant funds. Total funding for each agreement for the period of date of Board approval through June 30, 2014 is as follows: BHS - \$272,335; Prototypes - \$272,335; and TTC - \$2,847,143. Since all purchases of medications used in the pilot are made through TTC, funding for TTC is budgeted higher than the other two agencies (funding is based on \$782 per dose and for a total of 960 doses annually). TTC has purchasing capability for direct and reduced rate purchases, and has the infrastructure to store and maintain a medicine inventory; BHS and Prototypes do not. TTC also provides MAT services to SAPC's Antelope Valley Rehabilitation Programs and other agencies.

Justification

As mentioned above, MAT as an intervention is costly. The cost of medication is currently \$782 per dose, and MAT protocol requires at least three doses (one each month) with additional costs for supportive care. The delegated authority to adjust funding by 25 percent will provide DPH-SAPC greater flexibility in purchasing the medications and/or serve a larger segment of the population, when additional funding becomes available through the State realignment and other sources. An increase of only up to 10 percent will not be efficient for providing a full round of supportive care and/or expanding MAT services to a point to make a difference in the study.

Notification Timeline

Consistent with the procedures of Board Policy 5.120, we are informing your Board of our intention to proceed with the filing of the Board letter with the Executive Office of the Board for the November 15, 2011 Board meeting.

If you have any questions or need additional information, please let me know.

JEF:dhd

c: Chief Executive Officer
County Counsel
Executive Officer, Board of Supervisors